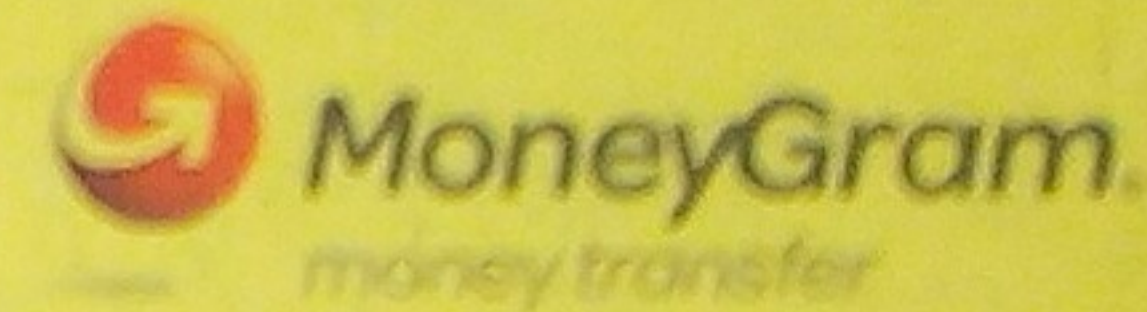


# Receive Form

PLEASE COMPLETE IN BLOCK CAPITALS

REFERENCE NUMBER

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## RECEIVER

Title (please tick) Mr. Mrs. Ms. Miss Other (please state)

First Name \_\_\_\_\_

Middle Name \_\_\_\_\_

Surname \_\_\_\_\_

Relationship to Sender Father Mother Wife Husband Siblings Others

Date of Birth and Country (optional) \_\_\_\_\_

Purpose of transaction Personal Use Family Maintenance Medical Educational Others

Address \_\_\_\_\_

Town/City \_\_\_\_\_

Postcode \_\_\_\_\_

Country \_\_\_\_\_

Contact Tel. No. (Please include area code) \_\_\_\_\_

## SENDER

Title (please tick) Mr. Mrs. Ms. Miss Other (please state)

First Name \_\_\_\_\_

Middle Name \_\_\_\_\_

Surname \_\_\_\_\_

Contact Tel. No. (Please include area code) \_\_\_\_\_

Country \_\_\_\_\_

Am't. Expected \_\_\_\_\_

## SIGNATURE

This is our standard form client agreement upon which we intend to rely. For your own benefit and protection, you should read the terms and conditions which apply to your transaction on the reverse of the form carefully before signing below. If you do not understand any point please ask for further information.

- That the above receipt is personal in nature and is not trade related.
- That I have not received more than thirty remittances this year.
- The value of each transaction received by me does not exceed the INR equivalent of USD 2,500/- the prescribed limit set by RBI.

I acknowledge receipt of the MoneyGram transfer as provided above.

Receiver's Signature \_\_\_\_\_ Date \_\_\_\_\_

**For our complaints handling procedure, see reverse**

DISTRIBUTION: Top Copy - Agent Middle Copy - Office Bottom Copy - Customer

## AGENT USE ONLY

Authorisation Code \_\_\_\_\_

Office Name/Stamp (letter or) \_\_\_\_\_

Date \_\_\_\_\_

MoneyGram Operator ID Number \_\_\_\_\_

Amount Paid	Currency	Amount
	Indian Rupees	

Amount in words \_\_\_\_\_

Cheque No. \_\_\_\_\_ Date \_\_\_\_\_

Bank \_\_\_\_\_

Send Country \_\_\_\_\_

Was a test question used/answered correctly? (please tick)

### For transactions requiring (ID):

Receiver's ID Type of ID and number \_\_\_\_\_

Receiver's date of birth \_\_\_\_\_

Issuing Jurisdiction State/Country \_\_\_\_\_

### For transactions requiring additional information:

Receiver's Occupation Salaried Self-Employed Student Retired Govt.

If the receiver is a US citizen Social Security No. \_\_\_\_\_

MoneyGram may use the information provided on this form for the purpose of sending you further information about the services offered by MoneyGram. If you wish to receive such information, please tick this box.

\*Please note: As per location all payments exceeding Rs. 50,000 to Indian National to be paid by Cheque/DD/PO.

This is a Multipart Set. Please use a Ball Point Pen

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